

**KANSAS DEPARTMENT OF AGRICULTURE**

**Meat and Poultry Inspection  
109 SW 9th Street  
Topeka, Kansas 66612  
(785) 296-3511**

**APPLICATION FOR CUSTOM AND RETAIL OPERATION EXEMPTION**

**Establishment Name** \_\_\_\_\_ **Number** \_\_\_\_\_

**Address** \_\_\_\_\_

**A.** Application is hereby made for inspection exemption as provided by K.S.A. 65-6a31(b), at the above mentioned establishment, at which the following operations are conducted: *(please check type of operation)*

☐ **Custom operation.** K.S.A. 65-6a31(b) **(Go to section C)**

☐ **Custom and retail operation.** K.S.A. 65-6a31(b),(c) **(Go to section B)**

**B.** I will maintain separation of custom prepared meat products and inspected meat products by the plan outlined below. (Explain how you intend to handle each of the following items. Use the back of this form if additional space is needed.)

**1.** Arrangement of meat products in the cooler.

**2.** Days and time of day of processing inspected products.

**3.** Separation and control of curing and smoking.

**4.** Marking of processed products and branding of uninspected carcasses.

**C.** I understand the requirements of the Kansas Meat and Poultry Inspection Act and Regulation 4-16-3a(c).

	_____	(Establishment Name)
Date _____	_____	(Signature of Applicant)
		(Title)
Date _____	APPROVED BY _____	(Signature of Area Veterinarian Supervisor)

*All of the above information must be completed and signed before sending to the Kansas Department of Agriculture Meat and Poultry Inspection - Topeka office.*

This institution is an equal opportunity provider.

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**CERTIFICATE OF EXEMPTION**

Inspection Exemption is hereby granted as provided by K.S.A. 65-6a31 (b). **KANSAS DEPARTMENT OF AGRICULTURE**

Date \_\_\_\_\_

By \_\_\_\_\_  
Director , Meat & Poultry Inspection